



## San Antonio Uniformed Services Health Education Consortium San Antonio, Texas

### Advanced Resuscitative Training Policy

**I. Purpose.** This policy is designed to clarify advanced resuscitative training requirements needed to graduate from a SAUSHEC Graduate Medical Education (GME) training program.

**II. Background.** SAUSHEC has required physician graduates to possess Advanced Cardiac Life Support (ACLS) certificates. Notable exceptions were Pediatric or Pediatric subspecialty graduates, for whom the Pediatric Advanced Life Support (PALS) or Neonatal Resuscitation Program (NRP) certificates were deemed equivalent. This policy allows certain specialties to request exemptions for their residents using the procedure outlined in paragraph IV.D.

A. Air Force Instruction (AFI) 44-102 1 May 2006, Section 3.8 requires that all staff physicians maintain a current ACLS certificate. The instruction applies to “any privileged healthcare provider...who may deliver acute or emergency medical care, moderate sedation or general anesthesia to adults (18 years or older), regardless of the clinical area where the care is provided.” The AFI identifies three categories of excluded providers: 1) exemptions for clinically-active, critical care providers who maintain competence through their daily clinical activities. The exemption lasts up to 2 years and must be renewed with each re-privileging action; 2) waivers for civilian contractors who work limited hours as well as in settings where there is adequate emergency back-up and ACLS capabilities; and 3) extensions limited to 3 months for providers unable to renew their certificates.

B. Army Regulation (AR) 40-68 22 May 2009, Section 5-1.e. requires ACLS certification for anesthesia providers and emergency department personnel. Due to Joint Commission requirements, providers performing conscious sedation procedures are usually required to maintain ACLS certification. Decisions about other providers are delegated to each medical treatment facility (MTF) commander. AR 40-68 requirements are significantly less comprehensive than those of AFI 44-102.

**III. Discussion.** One rationale for all military physicians to possess advanced resuscitative skills is to be better prepared for deployment and remote duty. During these times, providers may be called upon to practice outside their usual scopes of practice. Training in advanced life support may make a survival difference for critical patients. Previously deployed surgeons recommend accepting Advanced Trauma Life Support (ATLS) certification in lieu of ACLS, based upon their experiences in the field. Additionally, with the demands on adjusting to a new position and the uncertainties surrounding training resources at the receiving MTF, it is imperative that graduates report to their new assignment fully able to be credentialed and current on all certifications. Members of some physician specialties (such as Pathology), contend that they never provide acute resuscitation.

#### **IV. Policy**

A. At the time of their graduation, each SAUSHEC resident and fellow must comply with Service-specific policies for advanced resuscitative training and certification. The training certificate (ACLS, ATLS, PALS, or NRP) possessed by the graduate must be appropriate for the graduate's area of specialization. The certificate must remain current for at least 90 days following graduation from the training program.

B. Prospective graduates, who fail to comply with Service-specific, training and certification requirements by 15 Mar should be counseled and placed on Program Level Remediation (PLR). Those who are not compliant as of 15 May will be placed on Dean's Administrative Remediation (DAR). Further delinquency may result in extension of training, probation, or other adverse action.

C. Program directors and prospective graduates must ensure training schedules are managed to allow for both completion of program training requirements and skill recertification, as necessary.

D. GME program directors may apply for one-time waivers to this rule, which must be approved by the SAUSHEC GME Committee and ratified by the SAUSHEC Board of Directors.